

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	KH	75011	8/14
O.I.P.E. CLASSIFIER	12	32	3/17
FORMALITY REVIEW		6447	5-5-10
RESPONSE FORMALITY REVIEW	LA	60390	7/18/00

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final Original	
6	10 5
7	27 17 24
8	03 03 04
9	✓ ✓ ✓
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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